

Thomas Jefferson Middle School
Arlington, Virginia

August, 2014

Dear Parents/Guardians:

On Monday September 8th, as in years past, students will be given the option of going after school to the attached Arlington Parks, Recreation, and Cultural Resources (PRCR) recreation center to participate in their Teen Program. This allows, among other things, access to open gym (normally after 3:30 pm), the game room, and a variety of programming provided by PRCR Office for Teens staff. Additionally, PRCR Office for Teens staff regularly collaborate with Jefferson Middle School staff to bring participating students to Jefferson home sporting events.

Those students who opt to go to the rec. center after school may take the 4:21pm late bus home, provided they follow appropriate check-in procedures.

Students may go to the rec. either directly after school or after participating in homework club, sports choice, or any other after-school program put on by Jefferson Middle School.

The Teen Program at the Jefferson recreation center runs until 6:00pm Monday-Friday and is open to all Arlington county students. The rec. center, of course, is also open to the public.

Rec./School check-in procedures will be explained to students during T/A. They are designed to discourage students from leaving the supervision of the rec. **Students found to have left the rec. center without the authorization or accompaniment of a staff member will be denied late bus privileges.**

While students are given the option of going to the rec., it should be reinforced by parents that this is not a substitute for homework club or any other after-school academic support provided by Jefferson Middle School. Academics come first!

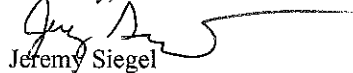
If your child plans to participate in this program please fill out the attached permission slips. The first slip should be returned to your student's T/A teacher, the second sheet should be given to rec. center on the first day your student attends their program.

Questions about rec. center programming can be referred to Ms. Aquila Criss, the Office for Teens supervisor assigned to the rec. center. Her phone number is 703-228-6983 or email acriss@arlingtonva.us

It should be mentioned that while at the rec. center, students are under the care of Arlington Parks, Recreation, and Cultural Resources, not Jefferson Middle School or Arlington Public Schools.

Please feel free to call or email me with any questions, comments, or concerns.

Sincerely,



Jeremy Siegel

Activities Coordinator

703-228-5904

jeremy.siegel@apsva.us

Return to Mr. Siegel ~ T/A

Arlington Public Schools
Thomas Jefferson Middle School
125 South Old Glebe Road
Arlington, Virginia 22204

Authorization/Release to Participate in Thomas Jefferson
Recreation Center After-School Program

Please fill in the blank spaces below:

I, (Please Print Parent/Guardian's Name) _____ do hereby
grant permission to my son/daughter/dependant (Print Child's Name)

_____ to leave the care of Thomas Jefferson Middle
School after school hours for the purposes of participating in Thomas Jefferson
Recreation Center's After-School Program. I understand that while my child is
participating in this program he/she is under the care of the Department of Parks,
Recreation and Community Resources, not Arlington Public Schools. By signing below I
am indicating that I understand that Arlington Public Schools will not be responsible for
the supervision of my child while he/she is under the care of the Department of Parks,
Recreation and Community Resources.

(Please Sign Parent/Guardian Name Here) _____

Date: _____

español →

Return to Mr. Siegel & T/A

Escuela Intermedia Thomas Jefferson
125 South Old Glebe Road
Arlington, Virginia 22204

Autorización para participar en el programa después de clases del
Centro de Recreación de Thomas Jefferson

Por favor complete los espacios en blanco.

(Por favor escriba en letra de molde).

Por medio de la presente,

yó _____

Autorizo a mi hijo(a) _____ a

dejar las instalaciones de la escuela Jefferson con el fin de participar en el programa después de clases en el Centro de Recreación de Thomas Jefferson. Es de mi conocimiento que mientras mi hijo(a) participe en dicho programa no estará bajo la supervisión de las escuelas públicas de Arlington.

Mi firma en este documento indica que estoy enterado de que el centro de Recreación de Thomas Jefferson es una dependencia del Departamento de Parques y Recreaciones del Condado y no parte de las escuelas públicas de Arlington.

Firma: Padre/encargado _____

Fecha: _____

Return to Rec. Center



Teen Programs REGISTRATION FORM

Full Name: _____ Nickname: _____
Birth Date: _____ Age: _____ Grade: _____ School: _____ Rec. Center _____
Address: _____
Home Phone: _____ Language(s) Spoken at Home: _____
Parent/Guardian (At home): _____ Contact Phone #s: _____
Parent/Guardian: _____ Contact Phone #s: _____
E-mail address (for activity updates) _____
Emergency Contact: _____ Contact Phone #s: _____
School Counselor: _____ Phone #: _____

PARTICIPANT INFORMATION AND CHARACTERISTICS

(Please check and provide information if participant has any of the following)

- Allergies: _____
- Medications: Type & time of day: _____
- Dietary Restrictions: _____
- Chronic conditions/illnesses: _____
- Any unusual fears: _____
- Easily upset/difficulty controlling temper: _____
- Physically aggressive: _____
- Withdrawn/shy: _____
- Hyperactive: _____
- Special needs or accommodations: _____

HOLD HARMLESS AGREEMENT

As consideration for the right to participate in Arlington County Teen Programs and/or other activities and services provided by the Arlington County Department of Parks, Recreation and Cultural Resources, its agents and employees, including food service, I, on behalf of myself and family, hereby covenant to hold harmless and indemnify the County and all its officers, departments, agencies, agents and employees from any and all claims, losses, damages, injuries, fines, penalties and costs (including court costs and attorney's fees), charges, liabilities, or exposures, connected to my or my family's participation in the above described program. I hereby give my child/ward my permission to go on field trips during this program. I understand that I will be informed in advance of any field trips.

I have read and understand this **HOLD HARMLESS AGREEMENT** and by my signature agree to its terms.

Parent/Guardian Signature

Date

PLEASE TURN OVER

PHOTO RELEASE

The purpose of this release is to facilitate public awareness of our programs. I, the undersigned parent/guardian, hereby give permission without restrictions to Arlington County and its assignees to photograph, film or videotape my child during participation in Arlington County Department of Parks, Recreation, and Cultural Resources programs. The foregoing consent is granted with the understanding that I specifically waive any rights to compensation with respect to such use of my child's name, likeness, picture and/or voice.

Parent/Guardian Signature

Date

PERMISSION TO SHARE INFORMATION

Communication with other agencies who work with and on behalf of Arlington County youth help to ensure a safe and supportive environment at the community center. I, the undersigned parent/guardian, hereby give permission to Arlington County Public Schools to release information regarding the child named on this registration form to Arlington County Dept. of Parks, Recreation and Cultural Resources.

Parent/Guardian Signature

Date

YOUTH BEHAVIOR EXPECTATIONS

As a participant of Arlington Teen Programs, I will behave safely, responsibly and respectfully. This means that I will:

- Treat other people with kindness and respect
- Respect the property of other's, especially all property of the Community Center
- Avoid and discourage negative behavior
- Use staff to help resolve issues with others

Teen Programs Guidelines

- A. Arlington County and/ or its programs are not responsible for any lost, stolen, or damaged property.
- B. Arlington Teen Afterschool Program hours are 2:30pm to 6:00pm. You must sign in/out each day you participate. Once you sign out, you may NOT return that day. You must arrive directly from school. Anytime after 2:30pm, you must have a signed pass/ note from a school staff member.
- C. Our main policy is **ZERO TOLERANCE FOR VIOLENCE OR FLAGRANT DISRESPECT.**
- D. To participate in the Teen Program, participants must have a signed registration & contract on their next return.

Please understand that our programs are a privilege, not a right.

- 1. I will keep my body parts (hands, feet, etc.) to myself at ALL times.
- 2. I will ONLY speak with words that are polite and appropriate in a public place.
- 3. I will RESPECTFULLY listen to what the staff has to say.
- 4. I will use permitted equipment in the way it is intended for use and I will do my best not to damage it.
- 5. I will respect others. I will NOT bully or threaten other participants or staff.
- 6. I will talk out my disagreements. I will ask a staff member for help if I can not handle it myself.
- 7. I will make sure I place my belongings in the designated areas and not in front of doorways.
- 8. I will be respectful to those doing homework by remaining quiet when I am done or if I have no homework myself.
- 9. I will respect the facility by picking up my trash.

I agree to follow the guidelines outlined above. I understand that failure to comply with these guidelines will result in disciplinary actions, which may include: sitting out from participating, suspension from a program activity/ day/ event, and suspension for up to an entire week from the Teen program, or being dismissed from the program entirely.

Participant Signature: _____ Date: _____

I have reviewed the guidelines with my child and we agree to follow the guidelines outlined above. I understand that his/her failure to comply with these guidelines may result in disciplinary actions, which may include: sitting out from participating, suspension from a program activity/ day/ event, and suspension for up to an entire week from the Teen program, or being dismissed from the program entirely.

Parent Signature: _____ Date: _____